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CONFIRMATION NO. 4714

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/743,350	<b>FILING OR 371(c) DATE</b> 12/23/2003 <b>RULE</b>	<b>CLASS</b> 463	<b>GROUP ART UNIT</b> 3714	<b>ATTORNEY DOCKET NO.</b> 77297.006010
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *AMC*

This appln claims benefit of 60/435,274 12/23/2002 and claims benefit of 60/501,557 09/09/2003  
 and claims benefit of 60/502,675 09/15/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *AMC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
 04/02/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NV	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> 22	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>AMC</i>		

## ADDRESS

33717

## TITLE

Enhanced gaming system

<b>FILING FEE RECEIVED</b> 511	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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